

Assigned DOGM File No.: S1023/0061  
DOGM Lead: Wayne Western  
Permit Fee \$ \_\_\_\_\_ Ck # \_\_\_\_\_

Tax ID: 4443

STATE OF UTAH  
DEPARTMENT OF NATURAL RESOURCES  
DIVISION OF OIL, GAS AND MINING

1594 West North Temple Suite 1210  
145801

Salt Lake City, Utah 84114-5801  
Telephone: (801) 538-5291 Fax: (801) 359-3940

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Box

NOTICE OF INTENTION TO COMMENCE SMALL MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1987, and the General Rules as promulgated under the Utah Minerals Regulatory Program.

Note on confidentiality: Information provided in the notice of intention relating to the location, size, or nature of the mineral deposit that is clearly marked confidential will be protected as confidential. Each page or map requested to be kept confidential must be stamped or marked as such. The requested confidential information must describe how the confidential material relates to the location size or nature of the mineral deposit; provide a written claim of business confidentiality; and/or include a concise statement of reasons supporting the claim of business confidentiality, unless disclosing the location of explosives or historic, prehistoric, paleontological, or biological resource that must be considered confidential under statute.

"Small Mining Operations" mining operations which have a disturbed area of five or less surface acres at any time.

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I. GENERAL INFORMATION (Rule R647-3-104)

1. Name of Mine: TR#1 TR#2 AKA "SOLAR WIND" #1, #2
2. Legal name of entity (or individual) for whom the permit is being requested: GOT NAMED INC. / (John Holfert)
- Mailing Address: 1174 E. ELECTRA LN.  
City, State, Zip: SANDY, UT 84094  
Phone: 801-628-3648 Fax: 847-572-1310  
E-mail Address: jeremyffuller@gmail.com

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Type of Business: Corporation (X) LLC ( ) Sole Proprietorship (dba) ( )  
Partnership ( ) General \_\_\_\_\_ or \_\_\_\_\_ limited  
Or:  
Individual ( )

Entity must be registered (and maintain registration) with the State of Utah, Division of Corporations (DOC) [www.commerce.utah.gov](http://www.commerce.utah.gov).

Are you currently registered to do business in the State of Utah? G Yes G No

Entity # 87-0668054

If no, contact [www.commerce.utah.gov](http://www.commerce.utah.gov) to renew or apply.

Local Business License # \_\_\_\_\_ (if required)

Issued by: County \_\_\_\_\_ or City \_\_\_\_\_

3.

**Contact Person(s)**

Name: JEREMY FULLER Title: PRESIDENT  
 Address: 1174 E. ELECTRA LN.  
 City, State, Zip: SANDY, UT 84094  
 Phone: 801-628-3648 Fax: 847-572-1310  
 Emergency, Weekend, or Holiday Phone: 801-628-3648  
 E-mail Address: JEREMYFFULLER@GMAIL.COM

Contact person to be notified for: permitting (X) surety (X) Notices (X) (please check all that apply)

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Name: JOHN HOLFERT Title: AGENT  
 Address: 84 E. 1100 N.  
 City, State, Zip: BOUNTIFUL, UT 84010  
 Phone: 801-296-2516 Fax:   
 Emergency, Weekend, or Holiday Phone: 801-296-2516  
 E-mail Address: JWHOLFERT@COMCAST.NET

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Contact person to be notified for: permitting (X) surety (X) Notices (X) (please check all that apply)

Registered Utah Agent (as identified with the Utah Department of Commerce) (if individual leave blank):

Name: JEREMY FULLER  
 Address: 1174 E. ELECTRA LN.  
 City, State, Zip: SANDY, UT 84094  
 Phone: 801-628-3648 Fax: 847-572-1310  
 E-mail Address: JEREMYFFULLER@GMAIL.COM

4.

**If Business is a Sole Proprietor:**

Name of Owner: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

**If Business is a Corporation:**

Name of Officers: JEREMY FULLER Title: PRESIDENT  
 \_\_\_\_\_ Title: \_\_\_\_\_  
 \_\_\_\_\_ Title: \_\_\_\_\_  
 \_\_\_\_\_ Title: \_\_\_\_\_

Headquarters Address: 1174 E. ELECTRA LN.  
 City, State, Zip: SANDY, UT 84094  
 Headquarters Phone: 801-628-3648 Fax: 847-572-1310  
 E-mail Address: JEREMYFFULLER@GMAIL.COM

**If Business is a Limited Liability Company: Member Managed G Manager Managed G**

Name of 1<sup>st</sup> Member/Manager: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

Name of 2<sup>nd</sup> Member/Manager: \_\_\_\_\_  
 Business Address: \_\_\_\_\_  
 City, State, Zip: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_  
 E-mail Address: \_\_\_\_\_

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**If Business is a Partnership:**

Name of Partner: \_\_\_\_\_

Business Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

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**5. Ownership of Land Surface:**

Private (Fee) G

Public Domain (BLM) G

National Forest (USFS) G

State Trust Land/School Sections G

State Sovereign Lands G

Other (please describe): \_\_\_\_\_

Name Richfield BLM

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

**6. Ownership of Minerals:**

Private (Fee) G

Public Domain (BLM) G

National Forest (USFS) G

State Trust Land/School Sections G

State Sovereign Lands G

Other (please describe): \_\_\_\_\_

Name Richfield BLM

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

BLM Lease or Project File Number(s) and/or USFS assigned Project Number(s): \_\_\_\_\_

UTU-75879 S/023/061

BLM Claim Numbers UMC409052 , UMC409053

Utah State Lease Number(s): \_\_\_\_\_

Name of Lessee(s) \_\_\_\_\_

**7. Have the above surface and mineral owners been notified in writing?**

Yes XX

No \_\_\_\_\_

If no, why not? \_\_\_\_\_

*Please be advised that if State Trust Lands are involved, notification to the Division of Oil, Gas and Mining alone does not satisfy the notification requirements of Mineral Leases upon State Trust Lands. Exploration or mining activity on State Trust Lands requires a minimum of 60 days notice to the Trust Lands Administration prior to commencing any activities. Please contact the School Institutional Trust Lands Administration (SITLA) at (801) 538-5508 for notification requirements.*

**8. Does the Entity have legal right to enter and conduct mining operations on the land covered by this notice? Yes XX No \_\_\_\_\_**

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#### DIV. OIL GAS & MINING

County(ies): JUAB

SW 1/4, of NW 1/4, of 1/4: Section: 20 Township: 11S Range: 11W  
 1/4, of 1/4, of 1/4: Section: Township: Range:  
 1/4, of 1/4, of 1/4: Section: Township: Range:

UTM East \_\_\_\_\_ (if known) UTM North \_\_\_\_\_ (if known)

Name of Quad Map for Location: DUGWAY PASS 7.5 QUAD USGS

1. **Type of mining:** Surface ☒ Underground ☐
2. **Mineral(s) to be mined:** TOPAZ AND ASSOCIATED MINERALS
3. **Amount of material to be extracted, moved, or proposed to be moved:** LESS THAN 1 TON
4. Will **any water, liquid chemicals, reagents, or other solutions** be used, produced or discharged as part of the mining or milling process?  
Yes ☐ No ☒ If yes, please describe (add extra pages if needed) \_\_\_\_\_

**VIII. SIGNATURE REQUIREMENT**

**CERTIFICATION**

I state under penalty of perjury under the laws of the state of Utah and the United States of America that:

- a. I have read this form and declare the information, statements and/or documentation are true, correct and complete to the best of my knowledge and belief; AND
- b. I commit to the reclamation of the aforementioned small mining project as required by the Utah Mined Land Reclamation Act (40-8) and the rules as specified by the Board of Oil, Gas and Mining.
- c. **This certification must be signed by:** (1.) an executive officer if the applicant is a corporation; (2.) a partner if applicant is a partnership (general or limited); (3.) the owner if applicant is a sole proprietorship; or (4.) the member or manager if applicant is a limited liability company.

Signature: Jeremy Fuller Date: 10-11-2011  
Name (typed or printed): JEFFERY FULLER  
Title/Position (if applicable): President

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